

What's Growing in Your Lab's Biosafety Culture?

Lately, you may be hearing more and more about creating a culture of biosafety in your laboratory. Due to emerging infectious disease outbreaks over the last couple of years (Ebola, MERS, Zika, Chikungunya), biosafety concerns have risen to the top of the "list of important issues" that laboratorians have to deal with on a day-to-day basis. It is not only major reference laboratories or national laboratories such as the CDC that should consider safer methods of dealing with highly infectious agents. In fact, these laboratories, for the most part, know in advance what kind of pathogens are coming into their workspace, and their labs are specially designed and the scientists highly trained to work safely with infectious agents. What about the clinical laboratories who are on the front lines? We do not know what the patient has when they enter our facility. What if we have already performed routine testing before diagnosis with a highly infectious pathogen? Accidents can happen

anywhere that patient samples or cultures are manipulated, and as we have seen recently, some of these incidents become highly publicized, shaking the confidence of the general population who do not necessarily understand the measures we take to ensure safety and protection to those both inside and outside of our work environment. It is important that laboratorians be adequately trained to protect themselves and others from exposure to highly infectious agents, and that they have a means of reporting such exposure should it occur, in order to reduce the risk of laboratory-acquired infections.

The Montana Public Health Laboratory (MTPHL) is participating in a national effort to improve biosafety awareness and practices in the nation's laboratories in order to meet the continuous challenge of working with emerging infectious agents. As part of this effort, we have developed a biosafety team whose purpose is to improve our internal biosafety knowledge and practices and to support the efforts of Montana clinical laboratories to develop or, improve their own biosafety programs. To support this mission, the Association of Public Health Laboratories (APHL) has developed tools that can assist laboratories in ensuring their facilities are safe, and that their staff is adequately trained and aware of how to work safely to keep pathogens contained. Two such tools include the January 2012 MMWR ["Guidelines for Safe Work Practices in Human and Animal Medical Diagnostic Laboratories: Recommendations of a CDC-convened, Biosafety Blue Ribbon Panel"](#) (MTPHL distributed hard copies of this publication to laboratories in our state), and the April 2011 MMWR ["Guidelines for Biosafety Laboratory Competency"](#). The January 2012 MMWR is an excellent resource, consisting of a complete breakdown of the essential elements of biosafety, including laboratory design and fundamentals of safety in different types of testing laboratories, risk assessment, and packaging and shipping.

APHL has also published more recent tools, including a [biosafety checklist](#), best practices for conducting risk assessments, and risk assessment templates for [Zika](#) and [Ebola](#). Of course, not all laboratories are testing for Zika and Ebola, but the principles contained are useful in conducting your own risk assessments for highly infectious agents. MTPHL will continue to forward these as they become available.

For additional assistance, please contact [Crystal Fortune](#), [Donna Jo Larson](#), [Debbie Gibson](#), or [Lana Moyer](#).

Save the Date!!

In order to jumpstart a hearty biosafety program in Montana, the MTPHL intends to host two workshops in September 2016, presented by recognized biosafety experts. These two-day training events are tentatively planned for September 12th and 13th at the Crown Plaza in Billings, and for September 15th and 16th at the Holiday Inn Downtown in Helena. We encourage laboratory technical staff and management to attend, and continuing education will be provided. Please provide feedback regarding your desire and ability to attend. Travel support may be provided depending upon funding availability. More information will be coming soon, including a program agenda, but until then, please consider participating in this important training opportunity. For more information, contact Crystal Fortune, cfortune@mt.gov, or 406-444-0930.

Updates from the MT
Laboratory Services

Bureau

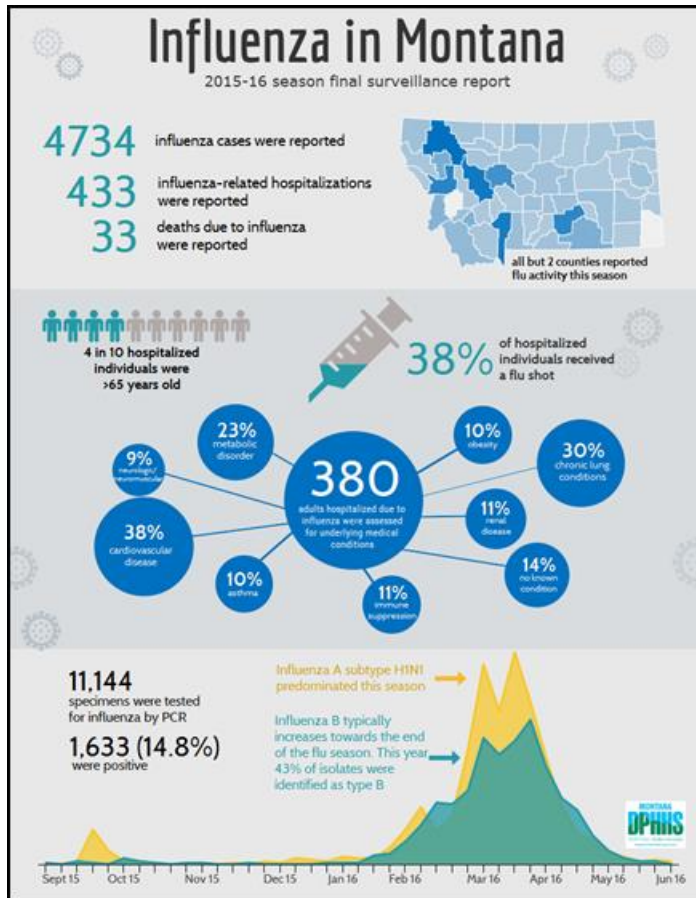
800-821-7284

www.lab.hhs.mt.gov



Release date: 6/10/2016

Infographic of the Week: This week we present a summary of the 2015-16 influenza season. To view the final report, visit: <http://dphhs.mt.gov/publichealth/cdepi/diseases/influenza.aspx>



To download and print a high resolution pdf version of the infographic, or to view the archive of weekly infographics, please visit the [CDEpi infographics page](#).

DISEASE INFORMATION

Summary – MMWR Week 22 – Ending 6/4/16 Preliminary disease reports received by DPHHS for the reporting period May 29–June 4, 2016 included the following:

- **Enteric Diseases:** Campylobacteriosis (8), Cryptosporidiosis (3), Salmonellosis (1), Shiga toxin-producing *E. coli* [STEC] (1)
- **Vaccine Preventable Diseases:** Influenza hospitalization[†] (5), Pertussis (1), *Streptococcus pneumoniae* (3)
- **STD/HIV:** Chlamydia (58), Gonorrhea (17), Syphilis (0), HIV^{*} (1)
- **Hepatitis:** Hepatitis C, chronic (11)
- **Zoonotic diseases:** (0)
- **Animal Rabies:** (0)
- **Elevated blood lead:** (2)

^{*} A case is included if a new confirmatory test or report was received by DPHHS. Cases include both persons who were newly diagnosed and persons newly reported in Montana who may have been diagnosed in another state or country.

[†] Influenza hospitalizations are presented by the MMWR week that the case was reported into MIDIS. For additional information on influenza, please refer to the weekly Montana Influenza Summary.

NOTE: The attached report has multiple pages reflecting the following information: (1) cases for the past reporting week; (2) communicable diseases YTD; (3) STD cases for the past reporting week; (4) clusters and outbreaks; and (5) a quarterly HIV/STD summary.

HOT TOPICS

Summer Institute (CDEpi Courses):



CDEpi, in collaboration with the Food and Consumer Safety Section and the Colorado Centers of Excellence, is offering two courses this year:

Epi-Ready Team Training: Foodborne Illness Response Strategies

A must do course for communicable disease nurses, environmental health specialists and laboratorians working on foodborne outbreak investigations. How to work together, who is doing what and why we can only solve foodborne outbreaks as a team will be covered in this course.

The Dos and Don'ts of Public Health Communication and Response

365 days of CDEpi calls wrapped into one course. We will address nearly every question we receive about what public health response in Montana looks like: Who has what authority and how to enforce it? How much information can be released and to whom? How to communicate with the media and public? How to elicit good recall from cases during interviews? An excellent course for anyone engaged in communicable disease response in Montana who needs to know the laws and reasons behind our actions.

If you would like to attend any of these courses, please visit:

<http://dphhs.mt.gov/publichealth/PHEPTraining/SummerInstitute.aspx>

Rabies: Rabies calls continue to increase, and now that school is out we expect that trend to continue. Remember, all animal bites are reportable to your local health jurisdictions and all your local providers need to know your 24/7 telephone number. In addition, rabies post exposure prophylaxis (PEP) recommendations are reportable to CDEpi. The PEP reporting form can be downloaded from the CDEpi form library on SharePoint.

For more information and a referral for callers, click on the graphic below to access the CDEpi rabies webpage.



Influenza: The 2015-16 influenza reporting period officially ended on June 4. Thank you for all of your efforts to report cases and hospitalizations in order to provide an accurate view of the flu season in Montana.

To view the 2015-16 season summary of influenza activity in Montana, please visit: [Montana Influenza Summary](#).

The weekly CDC Influenza Surveillance Report is available at the [FluView](#) link.

Mumps: An additional case of mumps was reported in Gallatin County last week (6/3), bringing the total number of reported cases to 21. The recent case is a known contact of a previously reported mumps case; however, the time between the infectious period of the previously reported case and the onset of disease in the most recent case far exceeds the typical incubation period of 16-18 days. Gallatin County is continuing to investigate the recent case to identify a link to the current outbreak.

Zika Update: Requests for Zika testing continue. The Montana Public Health Laboratory anticipates initiation of in-house Zika testing within the next week. As this process goes into effect, we will provide guidance on how the Montana based testing will be implemented. Below are the number of tests performed and results obtained as of Monday June 6.

<u>Zika Testing Status</u>	Count
Testing Completed- Negative (Non Preg)	21
Testing Completed- Negative (Preg)	23
Testing Completed- Positive (Non Preg)	1
Testing Pending (Non Preg)	8
Testing Pending (Preg)	10
Grand Total	63

- Tests performed as of June 6, 2016

INFORMATION/ANNOUNCEMENTS

Open Investigations in MIDIS: The “Open Investigations” feature is a nice tool in MIDIS that can help you keep track of your disease investigations that have not been completed.

It appears that many of the nearly 800 open investigations in MIDIS for the state should be closed. More than 500 of these investigations were started in 2015 or earlier. However, only you will know if the investigation should remain open or closed. Please review your jurisdiction’s open investigations queue and close cases that have been completed. For those that have been lost to follow-up, indicate “yes” lost to follow-up in the investigation and close the case. We recognize that some diseases require a lengthy follow-up process, and those investigations you are still working on can and should remain open. Rest assured, closing an investigation does not prevent you from updating the investigation should you receive additional information in the future.

Your open investigations can be viewed by logging into MIDIS and clicking on the “Open Investigations” link at the upper left of your screen. If you are able to view multiple jurisdictions, and you only want to view your jurisdiction:

1. Click the drop down arrow by “Jurisdiction”
2. Uncheck the box by “(Select All)”
3. Check the box by your jurisdiction

From here you can click on your investigations, click edit, change the investigation status to closed, and submit. Only close cases that belong to your jurisdiction. This will remove these investigations from your queue, which should allow you to see more clearly what investigations still need follow-up. Please call CDEpi (444-0273) if you have any questions.

Invitation for public health entities interested in less expensive rapid HIV testing (reminder): The STD/HIV/Hepatitis Prevention section is hosting a demonstration on the rapid HIV test (HIV1/2 Stat Pak) at seven locations across the state between June 13 – June 21. The ChemBio Company is offering the test at a special price of \$5.50 per test to public health entities. **All are welcome to attend, but please RSVP as space is limited. Bozeman is already full.** Please contact the location of your choice below to attend the one-hour training.

<p><u>BOZEMAN</u></p> <p>Monday, June 13th</p> <p>11:00 a.m.</p> <p>AIDS Outreach Office</p> <p>202 S. Black Ave,</p> <p>Suite 603</p> <p>Contact: Bob Cruz</p> <p>406-451-5718</p> <p>FULL</p>	<p><u>BILLINGS</u></p> <p>Monday, June 13th</p> <p>3:00 p.m.</p> <p>RiverStone Health</p> <p>123 South 27th St.</p> <p>Contact:</p> <p>Jace Dyckman</p> <p>406-651-6416</p>	<p><u>HELENA</u></p> <p>Tuesday, June 14th</p> <p>11:00 a.m.</p> <p>Cogswell Building</p> <p>1400 Broadway</p> <p>Room C205</p> <p>Contact: Stacy Russell</p> <p>406-444-1604</p>	<p><u>MISSOULA</u></p> <p>Tuesday, June 14th</p> <p>3:30 p.m.</p> <p>Creamery Building</p> <p>401 Railroad Street West</p> <p>Weinberg Room-2nd floor</p> <p>Contact: Barbs Schott</p> <p>406-258-4121</p>
<p><u>Great Falls</u></p> <p>Monday, June 20th</p> <p>3:00 p.m.</p> <p>Cascade City-County HD</p> <p>115 4th St South</p> <p>Contact: Trixie Smith</p> <p>406-791-9269</p>	<p><u>Glasgow</u></p> <p>Tuesday, June 21th</p> <p>9:00 a.m.</p> <p>Valley County HD</p> <p>501 Court Square #1</p> <p>Contact:</p> <p>Connie Boreson</p> <p>406-228-6263</p>	<p><u>Havre</u></p> <p>Tuesday, June 21th</p> <p>3:00 p.m.</p> <p>Hill County Health Dept.</p> <p>302 4th Ave</p> <p>Contact: Bridget Kallenberger</p> <p>406-265-5481 X266</p>	

Communicable Disease Epidemiology Suggestion Box:



To submit a question or comment to the Communicable Disease Epidemiology Section, please click on the suggestion box to access our online form.

Q&A CORNER

Q: When should I close an investigation in MIDIS?

A: You should close your case when your investigation is completed and all of the requested information has been entered and submitted in MIDIS. You can also close your investigation if the patient is lost to follow-up (LTF). If the patient is LTF, indicate so in your investigation before closing.

Q: Can I still enter case information after a case is closed?

A: Yes, you can continue updating the case record after it is closed. We do receive notifications any time a submitted case report is updated in MIDIS.

24/7 AVAILABILITY

The Communicable Disease Epidemiology (CDEpi) Section is available 24 hours a day, 7 days a week, 365 days a year, to assist local health jurisdictions. Local providers should call, including after normal business hours, their local health jurisdiction. The CDEpi 24-hour line is available as a back-up to the local health jurisdiction's 24-hour line. If you need CDEpi assistance, please call 406.444.0273. Phone calls to this number outside of normal business hours will be answered by the answering service. The answering service will immediately forward the message to CDEpi, and we will respond as quickly as possible.

Local health jurisdictions, please ensure that your local providers have your 24/7/365 contact information. And please inform CDEpi or the Public Health Emergency Preparedness Program of updates to your required 24/7 contact information.

This update is produced by the Montana Communicable Disease Epidemiology Section. Questions regarding its content should be directed to 406.444.0273 (24/7/365). For more information: <http://dphhs.mt.gov/publichealth/cdepi>